

STATE NEVADA
Standards for Optional State Supplementary Payments

Payment Category (Reasonable Classification)	Administered by Federal State	Income Level				Income Disregards Employed
		Gross		NET		
		1 - Per	Couple	1 - Per	Couple	
(1)	(2)	(3)			(4)	(4)
<u>Independent Living:</u>						
Aged	X	\$1,536.00	N/A		\$548.40	N/A
Blind	X	1,536.00	N/A		621.30	N/A
Disabled*		1,536.00	N/A		512.00	N/A
Both Aged	X	N/A	\$ 2,307	(not to	N/A	\$ 843.46
Aged/Blind	X	N/A	2,307	exceed	N/A	993.53
Both Blind	X	N/A	2,307	\$1,536	N/A	1143.60
Aged/Disabled	X	N/A	2,307	per	N/A	806.23
Blind/Disabled	X	N/A	2,307	person)	N/A	956.30
Both Disabled		N/A	2,307		N/A	769.00
<u>Home of Another:</u>						
Aged	X	\$1,024.02	N/A		\$365.61	N/A
Blind	X	1,024.02	N/A		555.30	N/A
Disabled*		1,024.02	N/A		341.34	N/A
Both Aged	X	N/A	\$ 1,538.01	(not to	N/A	\$ 562.31
Aged/Blind	X	N/A	1,538.01	exceed	N/A	803.47
Both Blind	X	N/A	1,538.01	\$1,024.02	N/A	1044.61
Aged/Disabled	X	N/A	1,538.01	per	N/A	537.49
Blind/Disabled	X	N/A	1,538.01	person)	N/A	778.64
Both Disabled		N/A	1,538.01		N/A	512.67

N No. 99-18
 upersedes
 N No. 99-01

Approved

FEB 17 2000Effective Date 01/01/2000

SUPPLEMENT 6 to
Attachment 2.6-A
Continued

Payment Category (Reasonable Classification)	Administered by Federal State	Income Level				Income Disregards Employed
		Gross		NET		
		1 - Per	Couple	1 - Per	Couple	
(1)	(2)	(3)			(4)	(4)
<u>In Congregate Care (FCH/AGFC)</u>						
Aged	X	\$1,536.00	N/A		\$ 862.00	N/A
Blind	X	1,536.00	N/A		862.00	N/A
Disabled*		1,536.00	N/A		512.00	N/A
Both Aged	X	N/A	\$ 2,307	(not to	N/A	\$ 1650.00
Aged/Blind	X	N/A	2,307	exceed	N/A	1650.00
Both Blind	X	N/A	2,307	\$1,536	N/A	1650.00
Aged/Disabled	X	N/A	2,307	per	N/A	1209.50
Blind/Disabled	X	N/A	2,307	person)	N/A	1209.50
Both Disabled	X	N/A	2,307		N/A	769.00

* There is neither mandatory nor optional supplementary payment for the disabled in Nevada.

TN No. 99-18
Supersedes
TN No. 99-07

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